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| United States Bankruptcy Court Northern District of Illinois                                       |                                       |                            |                                         |                                 |                                 | Voluntary Pe                              | tition                                                 |                    |
|----------------------------------------------------------------------------------------------------|---------------------------------------|----------------------------|-----------------------------------------|---------------------------------|---------------------------------|-------------------------------------------|--------------------------------------------------------|--------------------|
| Name of Debtor (if individent Hardeman, Sandra                                                     |                                       | t, First, Middle):         |                                         | Name o                          | f Joint Debtor (                | (Spouse) (Last, Firs                      | st, Middle):                                           |                    |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): |                                       |                            |                                         |                                 |                                 | by the Joint Debtor<br>en, and trade name |                                                        |                    |
| Last four digits of Soc. Sec xxx-xx-1524                                                           | ./Complete EI                         | N or other Tax ID          | $N_{O}$ . (if more than one, st         | ate all) Last fou               | r digits of Soc.                | . Sec./Complete EII                       | N or other Tax ID No. (if more                         | than one, state al |
| Street Address of Debtor (No. & Street, City, and State):  2213 Tamarack Drive  Joliet, IL         |                                       |                            |                                         |                                 | ddress of Joint                 | Debtor (No. & Str                         | eet, City, and State):                                 |                    |
|                                                                                                    |                                       |                            | ZIP Cod<br><b>60432</b>                 | e                               |                                 |                                           |                                                        | ZIP Code           |
| County of Residence or of Will                                                                     | the Principal I                       | Place of Business:         | ,                                       | County                          | of Residence o                  | or of the Principal P                     | lace of Business:                                      |                    |
| Mailing Address of Debtor                                                                          | (if different fr                      | rom street address)        | :                                       | Mailing                         | Address of Joi                  | int Debtor (if differ                     | ent from street address):                              |                    |
|                                                                                                    |                                       |                            | ZIP Cod                                 | e                               |                                 |                                           |                                                        | ZIP Code           |
| Location of Principal Asset<br>(if different from street add                                       | ts of Business<br>ress above):        | Debtor                     | ·                                       | •                               |                                 |                                           | ·                                                      |                    |
| <b>Type of Debtor</b> (Form of 0                                                                   | Organization)                         | Natur                      | e of Business                           |                                 | Cha                             | nter of Bankruptc                         | y Code Under Which                                     |                    |
| (Check one box                                                                                     | -                                     |                            | applicable boxes.)                      |                                 |                                 | the Petition is Filed                     |                                                        |                    |
| Individual (includes Joi                                                                           | · · · · · · · · · · · · · · · · · · · | Health Care I              |                                         | , Cha                           | pter 7                          | Chapter 11                                | ☐ Chapter 15 Petition for Re                           | ecognition         |
| Corporation (includes I                                                                            | LLC and LLP)                          | in 11 U.S.C.               | Real Estate as defin<br>§ 101 (51B)     |                                 |                                 | GI . 10                                   | of a Foreign Main Proceed                              | C                  |
| ☐ Partnership☐ Other (If debtor is not one                                                         | of the above                          | ☐ Railroad                 |                                         |                                 | pter 9 🔲 (                      | Chapter 12                                | Chapter 15 Petition for Re<br>of a Foreign Nonmain Pro |                    |
| entities, check this box and information requested belo                                            | d provide the                         | ☐ Stockbroker☐ Commodity I | Broker                                  |                                 | Chapter                         | : 13                                      |                                                        |                    |
| State type of entity:                                                                              |                                       | ☐ Clearing Ban             |                                         |                                 |                                 | Nature of Debts                           | (Check one box)                                        |                    |
|                                                                                                    |                                       |                            | ganization qualified<br>.C. § 501(c)(3) | ■ Con                           | sumer/Non-Bu                    | siness                                    | Business                                               |                    |
|                                                                                                    | Filing Fee (Cl                        | neck one box)              |                                         | Check o                         | no hove                         | Chapter 1                                 | Debtors                                                |                    |
| ☐ Full Filing Fee attached                                                                         |                                       |                            |                                         |                                 |                                 | usiness debtor as d                       | efined in 11 U.S.C. § 101(51)                          | D).                |
| Filing Fee to be paid in attach signed application                                                 | n for the cour                        | t's consideration co       | ertifying that the del                  | 101   —                         | tor is not a sma                | all business debtor                       | as defined in 11 U.S.C. § 101                          | (51D).             |
| is unable to pay fee exc                                                                           | •                                     | `                          |                                         | Check it                        | f:                              |                                           |                                                        |                    |
| Filing Fee waiver reque<br>attach signed application                                               | on for the cour                       | t's consideration. S       | ee Official Form 3B.                    |                                 |                                 | noncontingent liques than \$2 million.    | idated debts owed to non-ins                           | iders              |
| Statistical/Administrative                                                                         |                                       |                            |                                         |                                 |                                 |                                           | THIS SPACE IS FOR COURT                                | Γ USE ONLY         |
| ☐ Debtor estimates that fu☐ Debtor estimates that, a available for distributio                     | fter any exem                         | pt property is excl        |                                         |                                 | paid, there wil                 | l be no funds                             |                                                        |                    |
| Estimated Number of Cred                                                                           |                                       |                            |                                         |                                 |                                 |                                           | -                                                      |                    |
| 1- 50-                                                                                             | 100-                                  | 00- 1000-                  | 5001- 10,001-                           |                                 |                                 | /ER                                       |                                                        |                    |
| 49 99                                                                                              |                                       | 99 5,000                   | 10,000 25,000                           | 50,000                          |                                 | 0,000<br>                                 |                                                        |                    |
| <del></del>                                                                                        | <u> </u>                              |                            |                                         |                                 |                                 |                                           | -                                                      |                    |
| Estimated Assets<br>\$0 to \$50,001                                                                | to \$100,00                           | 11 to \$500,001 to         | so \$1,000,001 to                       | \$10,000,001 to                 | \$50,000,001 t                  | to More than                              |                                                        |                    |
| \$50,000 \$100,000                                                                                 | \$500,0                               | 000 \$1 million            | \$10 million                            | \$50 million                    | \$100 million                   | \$100 million                             |                                                        |                    |
|                                                                                                    |                                       |                            |                                         |                                 |                                 |                                           |                                                        |                    |
| Estimated Debts                                                                                    | to \$100.00                           | 11 to \$500,001            | o \$1,000,001 to                        | \$10,000,001 :                  | . \$50,000,001 :                | to Mono the                               |                                                        |                    |
| \$0 to \$50,001<br>\$50,000 \$100,000                                                              |                                       |                            |                                         | \$10,000,001 to<br>\$50 million | \$50,000,001 t<br>\$100 million |                                           |                                                        |                    |
|                                                                                                    |                                       |                            |                                         |                                 |                                 |                                           | I                                                      |                    |

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FORM R1 Page 2

(Official Form 1) (10/05) FORM B1, Page 2 Name of Debtor(s): Voluntary Petition Hardeman, Sandra K (This page must be completed and filed in every case) Prior Bankruptcy Case Filed Within Last 8 Years (If more than one, attach additional sheet) Case Number: Date Filed: Location Where Filed: - None -Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. and is requesting relief under chapter 11.) I further certify that I delivered to the debtor the notice required by §342(b) of the Bankruptcy Code. ☐ Exhibit A is attached and made a part of this petition. X /s/ Robert V. Schaller March 22, 2006 Signature of Attorney for Debtor(s) Date Robert V. Schaller SCR3-6190406 Exhibit C Certification Concerning Debt Counseling by Individual/Joint Debtor(s) Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public I/we have received approved budget and credit counseling during health or safety? the 180-day period preceding the filing of this petition. ☐ I/we request a waiver of the requirement to obtain budget and ☐ Yes, and Exhibit C is attached and made a part of this petition. credit counseling prior to filing based on exigent circumstances. No (Must attach certification describing.) Information Regarding the Debtor (Check the Applicable Boxes) Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Statement by a Debtor Who Resides as a Tenant of Residential Property Check all applicable boxes. Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.

Signatures

(Official Form 1) (10/05)

### Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Hardeman, Sandra K

### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by §342(b) of the Bankruptcy Code.

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

#### X /s/ Sandra K Hardeman

Signature of Debtor Sandra K Hardeman

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

March 22, 2006

Date

#### Signature of Attorney

#### X /s/ Robert V. Schaller

Signature of Attorney for Debtor(s)

#### Robert V. Schaller SCR3-6190406

Printed Name of Attorney for Debtor(s)

#### Robert Schaller Law Office

Firm Name

907 N. Elm, Suite 100 Hinsdale, IL 60521

Address

#### 630-655-1233

Telephone Number

March 22, 2006

Date

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

#### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by §1515 of title 11 are attached.
- ☐ Pursuant to §1511 of title 11, United States Code, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

| 7 | $\mathbf{v}$ |
|---|--------------|
| 1 | 1            |

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

#### **Signature of Non-Attorney Bankruptcy Petition Preparer**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

Date

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

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Form 6-Summary (10/05)

# **United States Bankruptcy Court Northern District of Illinois**

| In re | Sandra K Hardeman |        | Case No. |    |
|-------|-------------------|--------|----------|----|
|       |                   | Debtor |          |    |
|       |                   |        | Chapter  | 13 |

### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities."

|                                                       |                      |                  | AMOUNTS SCHEDULED |             |          |  |
|-------------------------------------------------------|----------------------|------------------|-------------------|-------------|----------|--|
| NAME OF SCHEDULE                                      | ATTACHED<br>(YES/NO) | NO. OF<br>SHEETS | ASSETS            | LIABILITIES | OTHER    |  |
| A - Real Property                                     | Yes                  | 1                | 160,000.00        |             |          |  |
| B - Personal Property                                 | Yes                  | 3                | 18,525.00         |             |          |  |
| C - Property Claimed as Exempt                        | Yes                  | 1                |                   |             |          |  |
| D - Creditors Holding Secured<br>Claims               | Yes                  | 2                |                   | 168,553.00  |          |  |
| E - Creditors Holding Unsecured<br>Priority Claims    | Yes                  | 2                |                   | 0.00        |          |  |
| F - Creditors Holding Unsecured<br>Nonpriority Claims | Yes                  | 9                |                   | 16,852.00   |          |  |
| G - Executory Contracts and<br>Unexpired Leases       | Yes                  | 1                |                   |             |          |  |
| H - Codebtors                                         | Yes                  | 1                |                   |             |          |  |
| I - Current Income of Individual<br>Debtor(s)         | Yes                  | 1                |                   |             | 4,048.00 |  |
| J - Current Expenditures of<br>Individual Debtor(s)   | Yes                  | 1                |                   |             | 2,073.00 |  |
| Total Number of Sheets of ALL S                       | Schedules            | 22               |                   |             |          |  |
|                                                       | Т                    | otal Assets      | 178,525.00        |             |          |  |
|                                                       |                      |                  | Total Liabilities | 185,405.00  |          |  |

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Form 6-Summ2 (10/05)

# **United States Bankruptcy Court Northern District of Illinois**

| In re | Sandra K Hardeman |        | Case No. |    |
|-------|-------------------|--------|----------|----|
|       |                   | Debtor |          |    |
|       |                   |        | Chapter  | 13 |

# STATISTICAL SUMMARY OF CERTAIN LIABILITIES (28 U.S.C. § 159) [Individual Debtors Only]

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability                                                                                    | Amount |
|------------------------------------------------------------------------------------------------------|--------|
| Domestic Support Obligations (from Schedule E)                                                       | 0.00   |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)                           | 0.00   |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E)                   | 0.00   |
| Student Loan Obligations (from Schedule F)                                                           | 0.00   |
| Domestic Support, Separation Agreement, and Divorce Decree<br>Obligations Not Reported on Schedule E | 0.00   |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)            | 0.00   |
| TOTAL                                                                                                | 0.00   |

The foregoing information is for statistical purposes only under 28 U.S.C § 159.

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Form B6A (10/05)

| In re | Sandra K Hardeman | Case No |  |
|-------|-------------------|---------|--|
| _     |                   | Debtor  |  |

#### SCHEDULE A. REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| Description and Location of Property Nature of Debtor's Wife, Debtor's Interest in Amou | Location: | 2213 Tamarack Drive, Joliet IL       | Joint tenant | -         | 160,000.00                                                         | 147,489.00                 |
|-----------------------------------------------------------------------------------------|-----------|--------------------------------------|--------------|-----------|--------------------------------------------------------------------|----------------------------|
| Husband Current Value of                                                                |           | Description and Location of Property |              | Joint, or | Debtor's Interest in<br>Property, without<br>Deducting any Secured | Amount of<br>Secured Claim |

160,000.00 Sub-Total > (Total of this page)

160,000.00 Total >

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Form B6B (10/05)

| In re | Sandra K Hardeman | Case No |  |
|-------|-------------------|---------|--|
|       |                   |         |  |
|       |                   | Debtor  |  |

#### SCHEDULE B. PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." In providing the information requested in this schedule, do not include the name or address of a minor child. Simply state "a minor child."

|     | Type of Property                                                                                                                                                                                                          | N O Description and Location of Property E                                                    | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |  |
|-----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|---------------------------------------------|-----------------------------------------------------------------------------------------------------------|--|
| 1.  | Cash on hand                                                                                                                                                                                                              | cash                                                                                          | -                                           | 0.00                                                                                                      |  |
| 2.  | Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | bank account with NuMark Credit Union                                                         | -                                           | 0.00                                                                                                      |  |
| 3.  | Security deposits with public utilities, telephone companies, landlords, and others.                                                                                                                                      | x                                                                                             |                                             |                                                                                                           |  |
| 4.  | Household goods and furnishings, including audio, video, and computer equipment.                                                                                                                                          | miscellaneous household goods and furnishingsestimated value                                  | -                                           | 2,600.00                                                                                                  |  |
| 5.  | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.                                                                                          | miscellaneous books, pictures, etc.                                                           | -                                           | 50.00                                                                                                     |  |
| 6.  | Wearing apparel.                                                                                                                                                                                                          | wearing apparel                                                                               | -                                           | 550.00                                                                                                    |  |
| 7.  | Furs and jewelry.                                                                                                                                                                                                         | miscellaneous items                                                                           | -                                           | 1,350.00                                                                                                  |  |
| 8.  | Firearms and sports, photographic, and other hobby equipment.                                                                                                                                                             | x                                                                                             |                                             |                                                                                                           |  |
| 9.  | Interests in insurance policies.  Name insurance company of each policy and itemize surrender or refund value of each.                                                                                                    | Debtor has no insurance policy with a cash value (term insurance does not have a cash value). | -                                           | 0.00                                                                                                      |  |
| 10. | Annuities. Itemize and name each issuer.                                                                                                                                                                                  | x                                                                                             |                                             |                                                                                                           |  |
|     |                                                                                                                                                                                                                           |                                                                                               |                                             |                                                                                                           |  |

Sub-Total > **4,550.00** (Total of this page)

**<sup>2</sup>** continuation sheets attached to the Schedule of Personal Property

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Form B6B (10/05)

| т.    | 0                 | C N     |   |
|-------|-------------------|---------|---|
| In re | Sandra K Hardeman | Case No |   |
|       |                   |         | Ξ |

Debtor

### SCHEDULE B. PERSONAL PROPERTY (Continuation Sheet)

|     | Type of Property                                                                                                                                                                                                                                            | N<br>O<br>N<br>E | Description and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property<br>without Deducting any<br>Secured Claim or Exemption |
|-----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|--------------------------------------|---------------------------------------------|----------------------------------------------------------------------------------------------------------|
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c); Rule 1007(b)). | х                |                                      |                                             |                                                                                                          |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.                                                                                                                                                                 | none             |                                      | -                                           | 0.00                                                                                                     |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize.                                                                                                                                                                                 | x                |                                      |                                             |                                                                                                          |
| 14. | Interests in partnerships or joint ventures. Itemize.                                                                                                                                                                                                       | X                |                                      |                                             |                                                                                                          |
| 15. | Government and corporate bonds and other negotiable and nonnegotiable instruments.                                                                                                                                                                          | X                |                                      |                                             |                                                                                                          |
| 16. | Accounts receivable.                                                                                                                                                                                                                                        | X                |                                      |                                             |                                                                                                          |
| 17. | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.                                                                                                                                        | X                |                                      |                                             |                                                                                                          |
| 18. | Other liquidated debts owing debtor including tax refunds. Give particulars.                                                                                                                                                                                | X                |                                      |                                             |                                                                                                          |
| 19. | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.                                                                                          | X                |                                      |                                             |                                                                                                          |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.                                                                                                                                        | X                |                                      |                                             |                                                                                                          |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.                                                                                    | X                |                                      |                                             |                                                                                                          |
|     |                                                                                                                                                                                                                                                             |                  |                                      | Sub-Tota of this page)                      | al > <b>0.00</b>                                                                                         |

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

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Form B6B (10/05)

| In re | Sandra K Hardeman | Case No |
|-------|-------------------|---------|
| _     |                   | •       |

Debtor

### SCHEDULE B. PERSONAL PROPERTY

(Continuation Sheet)

|     | Type of Property                                                                                                                                                                                                                                                                        | N<br>O<br>N<br>E | Description and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|--------------------------------------|---------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| 22. | Patents, copyrights, and other intellectual property. Give particulars.                                                                                                                                                                                                                 | X                |                                      |                                             |                                                                                                           |
| 23. | Licenses, franchises, and other general intangibles. Give particulars.                                                                                                                                                                                                                  | X                |                                      |                                             |                                                                                                           |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X                |                                      |                                             |                                                                                                           |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories.                                                                                                                                                                                                                      | 20               | 02 Dodge Ram                         | -                                           | 13,975.00                                                                                                 |
| 26. | Boats, motors, and accessories.                                                                                                                                                                                                                                                         | X                |                                      |                                             |                                                                                                           |
| 27. | Aircraft and accessories.                                                                                                                                                                                                                                                               | X                |                                      |                                             |                                                                                                           |
| 28. | Office equipment, furnishings, and supplies.                                                                                                                                                                                                                                            | X                |                                      |                                             |                                                                                                           |
| 29. | Machinery, fixtures, equipment, and supplies used in business.                                                                                                                                                                                                                          | X                |                                      |                                             |                                                                                                           |
| 30. | Inventory.                                                                                                                                                                                                                                                                              | X                |                                      |                                             |                                                                                                           |
| 31. | Animals.                                                                                                                                                                                                                                                                                | X                |                                      |                                             |                                                                                                           |
| 32. | Crops - growing or harvested. Give particulars.                                                                                                                                                                                                                                         | X                |                                      |                                             |                                                                                                           |
| 33. | Farming equipment and implements.                                                                                                                                                                                                                                                       | X                |                                      |                                             |                                                                                                           |
| 34. | Farm supplies, chemicals, and feed.                                                                                                                                                                                                                                                     | X                |                                      |                                             |                                                                                                           |
| 35. | Other personal property of any kind not already listed. Itemize.                                                                                                                                                                                                                        | X                |                                      |                                             |                                                                                                           |

Sub-Total > (Total of this page)

Total > 18,525.00

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

13,975.00

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Form B6C (10/05)

| In re | Sandra K Hardeman |        | Case No. |  |
|-------|-------------------|--------|----------|--|
| -     |                   | Debtor | ,        |  |

### SCHEDULE C. PROPERTY CLAIMED AS EXEMPT

| Debtor elects the exemptions to which debtor is entitled under: | ☐ Check if debtor claims a homestead exemption that exceeds |
|-----------------------------------------------------------------|-------------------------------------------------------------|
| (Check one box)                                                 | \$125,000.                                                  |
|                                                                 |                                                             |

☐ 11 U.S.C. §522(b)(2) ☐ 11 U.S.C. §522(b)(3)

| Description of Property                                                                      | Specify Law Providing<br>Each Exemption       | Value of<br>Claimed<br>Exemption | Current Value of<br>Property Without<br>Deducting Exemption |
|----------------------------------------------------------------------------------------------|-----------------------------------------------|----------------------------------|-------------------------------------------------------------|
| Real Property<br>Location: 2213 Tamarack Drive, Joliet IL                                    | 735 ILCS 5/12-901                             | 15,000.00                        | 160,000.00                                                  |
| Cash on Hand<br>cash                                                                         | 735 ILCS 5/12-1001(b)                         | 0.00                             | 0.00                                                        |
| Household Goods and Furnishings miscellaneous household goods and furnishingsestimated value | 735 ILCS 5/12-1001(b)                         | 2,600.00                         | 2,600.00                                                    |
| Books, Pictures and Other Art Objects; Collectible miscellaneous books, pictures, etc.       | <u>s</u><br>735 ILCS 5/12-1001(b)             | 50.00                            | 50.00                                                       |
| Wearing Apparel wearing apparel                                                              | 735 ILCS 5/12-1001(a)                         | 550.00                           | 550.00                                                      |
| Furs and Jewelry miscellaneous items                                                         | 735 ILCS 5/12-1001(b)                         | 1,350.00                         | 1,350.00                                                    |
| Interests in IRA, ERISA, Keogh, or Other Pension one                                         | or Profit Sharing Plans<br>735 ILCS 5/12-1006 | 100%                             | 0.00                                                        |
| <u>Automobiles, Trucks, Trailers, and Other Vehicles</u> 2002 Dodge Ram                      | 735 ILCS 5/12-1001(c)                         | 2,400.00                         | 13,975.00                                                   |

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Form B6D

| In re | Sandra K Hardeman | Case No. |  |
|-------|-------------------|----------|--|
|       |                   | ,        |  |
|       |                   | Debtor   |  |

#### SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C§112; Fed.R.Bankr.P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| - Check this box is debtor has no creation                                                                                           |          |       | ng secured claims to report on this Schedule D.                                                    | 1 -       |                  | -      |                                                                      |                                 |
|--------------------------------------------------------------------------------------------------------------------------------------|----------|-------|----------------------------------------------------------------------------------------------------|-----------|------------------|--------|----------------------------------------------------------------------|---------------------------------|
| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)                                 | CCDEBTCR | HW    | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN     | CONTINGEN | LIQUID           | SPUTED | AMOUNT OF<br>CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY |
| Account No. 0042517151/ Loan No. 3337                                                                                                | 541      |       | Mortgage                                                                                           | Т         | A<br>T<br>E<br>D |        |                                                                      |                                 |
| MERS/First Horizon<br>c/o Fisher & Shapiro<br>4201 Lake Cook Road, First Floor<br>Northbrook, IL 60062                               | ×        | (   - | Location: 2213 Tamarack Drive, Joliet IL                                                           |           |                  |        |                                                                      |                                 |
|                                                                                                                                      | 4        | _     | Value \$ 160,000.00                                                                                |           |                  | Ш      | 119,000.00                                                           | 0.00                            |
| Account No. 0042517151/ Loan No. 3337  MERS/First Horizon c/o Fisher & Shapiro 4201 Lake Cook Road, First Floor Northbrook, IL 60062 | 541      | -     | mortgage arrearage  Location: 2213 Tamarack Drive, Joliet IL                                       |           |                  |        |                                                                      |                                 |
|                                                                                                                                      |          |       | Value \$ 160,000.00                                                                                | 1         |                  |        | 10,000.00                                                            | 0.00                            |
| Account No. 1819000050002  Numark Credit Union 1654 Terry Dr Joliet, IL 60436                                                        |          | -     | Opened 1/15/03 Last Active 2/04/06 residence at 2213 Tamarack Drive, Joliet, IL and 2002 Dodge Ram |           |                  |        |                                                                      |                                 |
|                                                                                                                                      | ┸        |       | Value \$ Unknown                                                                                   |           |                  | Ш      | 21,064.00                                                            | Unknown                         |
| Account No. 852162710300001  State Farm FncI Svcs F 3 State Farm Plaza Bloomington, IL 61710                                         |          | -     | Opened 8/01/02 Last Active 2/04/05 Location: 2213 Tamarack Drive, Joliet IL                        |           |                  |        |                                                                      |                                 |
|                                                                                                                                      |          |       | Value \$ 160,000.00                                                                                | 1         |                  |        | 18,489.00                                                            | 0.00                            |
| continuation sheets attached                                                                                                         |          |       | ,                                                                                                  | Subt      |                  |        | 168,553.00                                                           |                                 |

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Form B6D - Cont. (10/05)

| In re | Sandra K Hardeman | ,      | Case No. |  |
|-------|-------------------|--------|----------|--|
| •     |                   | Debtor |          |  |

### SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

|                                                                                                            |          | _       |                                          |           |              |        |                                                                      |                                 |
|------------------------------------------------------------------------------------------------------------|----------|---------|------------------------------------------|-----------|--------------|--------|----------------------------------------------------------------------|---------------------------------|
| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)             | CODEBTOR | H W J C | DESCRIPTION AND VALUE                    | CONTINGEN | DD-DA        | SPUTED | AMOUNT OF<br>CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY |
| Account No. 07-12-201-007                                                                                  |          | T       | Location: 2213 Tamarack Drive, Joliet IL | ₩         | TED          | 1 1    |                                                                      |                                 |
| Will County TreasurerProperty Tax<br>Will County Office Building<br>302 N. Chicago St.<br>Joliet, IL 60432 |          | J       | V. 1. (b) 400 000 00                     |           | D            |        |                                                                      |                                 |
| Account No.                                                                                                | L        | ╀       | Value \$ 160,000.00                      | ╀         | ⊢            | Н      | 0.00                                                                 | 0.00                            |
| Account No.                                                                                                |          |         | Value \$                                 |           |              |        |                                                                      |                                 |
| Account No.                                                                                                |          | T       |                                          | T         |              |        |                                                                      |                                 |
| Account No.                                                                                                |          |         | Value \$                                 | _         |              |        |                                                                      |                                 |
|                                                                                                            |          |         | Value \$                                 | _         |              |        |                                                                      |                                 |
| Account No.                                                                                                |          |         | Value \$                                 | _         |              |        |                                                                      |                                 |
| Sheet 1 of 1 continuation sheets attac                                                                     | he       | d to    | 5                                        | Sub       | tota         | ıl     | 0.00                                                                 |                                 |
| Schedule of Creditors Holding Secured Claims                                                               |          |         | (Total of t                              | his       | pag          | ge)    | 0.00                                                                 |                                 |
|                                                                                                            |          |         | (Report on Summary of So                 |           | Tota<br>dule |        | 168,553.00                                                           |                                 |
|                                                                                                            |          |         |                                          |           |              |        |                                                                      |                                 |

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Form B6E (10/05)

| In re | Sandra K Hardeman | Case No. |  |
|-------|-------------------|----------|--|
| _     |                   | Debtor , |  |

#### SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C.§112; Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community". If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. If applicable, also report this total on the Means Test form.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)

#### ■ Domestic support obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

#### ☐ Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

#### ☐ Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,000\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, which ever occurred first, to the extent provided in 11 U.S.C. § 507 (a)(4).

#### ☐ Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

#### ☐ Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$4,925\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

#### ☐ Deposits by individuals

Claims of individuals up to \$2,225\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

#### ☐ Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C § 507(a)(8).

#### ☐ Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

#### ☐ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

<sup>\*</sup>Amounts are subject to adjustment on April 1, 2007, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

1 continuation sheets attached

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Form B6E - Cont. (10/05)

| In re | Sandra K Hardeman | Case No. |  |
|-------|-------------------|----------|--|
| _     |                   |          |  |
|       |                   | Debtor   |  |

#### SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

#### **Domestic Support Obligations**

TYPE OF PRIORITY UNLIQUIDATED CODEBTOR Husband, Wife, Joint, or Community CONTINGENT CREDITOR'S NAME, SPUTED AMOUNT H W AND MAILING ADDRESS DATE CLAIM WAS INCURRED **AMOUNT** ENTITLED TO INCLUDING ZIP CODE, AND CONSIDERATION FOR CLAIM OF CLAIM PRIORITY C AND ACCOUNT NUMBER (See instructions.) Account No. Illinois Department of Public Aid Division of Child Support Enforcem. 509 S. 6th Street, 6th Floor Springfield, IL 62701 0.00 0.00 Account No. Account No. Account No. Account No. Subtotal Sheet <u>1</u> of <u>1</u> continuation sheets attached to 0.00 0.00 (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims Total 0.00 0.00

(Report on Summary of Schedules)

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Form B6F (10/05)

| In re | Sandra K Hardeman |        | Case No. |  |
|-------|-------------------|--------|----------|--|
| -     |                   | Debtor | ,        |  |

#### SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C.§112; Fed.R.Bankr.P. 1007(m). Do not include claims listed in

Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community maybe liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in more than one of these three

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C<br>O<br>D<br>E<br>B<br>T<br>O<br>R | Hu<br>H<br>W |                                      | CONTINGE      | UNLIQUIDATE | D I S P U T E D | AMOUNT OF CLAIM |
|-------------------------------------------------------------------------------------------------------|--------------------------------------|--------------|--------------------------------------|---------------|-------------|-----------------|-----------------|
| Account No. 148383813                                                                                 |                                      |              |                                      | ⊢ N<br>T      | -           |                 |                 |
| Avenue<br>PO BOX 659584<br>San Antonio, TX 78265                                                      |                                      | -            |                                      |               | D           |                 |                 |
| Account No. <b>517805248720</b>                                                                       |                                      |              | Opened 10/01/04 Last Active 12/02/05 |               | -           |                 | 225.00          |
| Cap One Bk<br>Po Box 85520<br>Richmond, VA 23285                                                      |                                      | -            |                                      |               |             |                 |                 |
| Account No. <b>4357876020063230</b>                                                                   | 4                                    |              | Opened 11/01/04 Last Active 8/28/05  |               | $\perp$     |                 | 743.00          |
| Chase<br>800 Brooksedge Blvd<br>Westerville, OH 43081                                                 |                                      | -            |                                      |               |             |                 |                 |
| Account No.                                                                                           | _                                    |              |                                      |               | _           | -               | 1,946.00        |
| ComED Bill Payment Center Chicago, IL 60668                                                           |                                      | -            |                                      |               |             |                 | 75.00           |
| continuation sheets attached                                                                          |                                      | 1            | (Total o                             | Sub<br>f this |             |                 | 2,989.00        |

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| In re | Sandra K Hardeman |        | Case No. |
|-------|-------------------|--------|----------|
| _     |                   | Debtor |          |

|                                                                             | _        |             |                                                 |          | _   | _           |       |                 |
|-----------------------------------------------------------------------------|----------|-------------|-------------------------------------------------|----------|-----|-------------|-------|-----------------|
| CREDITOR'S NAME,<br>AND MAILING ADDRESS                                     | COD      | Hu<br>H     | usband, Wife, Joint, or Community               |          | 000 | U<br>N<br>L | D I S |                 |
| INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)                  | CODEBTOR | C<br>A<br>M | CONSIDERATION FOR CLAIM. IF CLAIM               | - 11     | N   | _ QD_       |       | AMOUNT OF CLAIM |
| Account No. 35746152401                                                     |          |             | Opened 9/01/95 Last Active 8/01/02              |          | ŕ   | DATED       |       |                 |
| Costep<br>2540 W Trenton Rd<br>Edinburg, TX 78539                           |          | -           | Educational                                     |          |     | ט           |       | 0.00            |
| Account No. 1223972                                                         | H        | T           | Opened 9/01/05                                  |          | 1   |             |       |                 |
| Creditors Discount & A<br>415 E Main St<br>Streator, IL 61364               |          | -           | Collection Cardiology Assoc Of                  |          |     |             |       |                 |
|                                                                             |          |             |                                                 |          |     |             |       | 81.00           |
| Account No. 1192901  Creditors Discount & Aud 415 E Main Streator, IL 61364 |          | -           | Opened 5/10/05<br>Collection Med102 Silver Cros |          |     |             |       | 1,642.00        |
| Account No. 1443946                                                         | ┝        | H           | Opened 1/17/05                                  | $\dashv$ | +   |             |       | .,6.12.00       |
| Creditors Discount & Aud<br>415 E Main<br>Streator, IL 61364                |          | -           | Collection Med1 Health Serv                     |          |     |             |       | 198.00          |
| Account No. 1186777                                                         |          |             | Opened 4/13/05                                  |          |     |             |       |                 |
| Creditors Discount & Aud<br>415 E Main<br>Streator, IL 61364                |          | -           | Collection Med102 Health Serv                   |          |     |             |       | 111.00          |
| Sheet no1 of _8 sheets attached to Schedule of                              |          | •           |                                                 | Su       | bto | ota         | l     | 2,032.00        |
| Creditors Holding Unsecured Nonpriority Claims                              |          |             | (Total                                          | of thi   | s p | ag          | e)    | 2,032.00        |

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Form B6F - Cont. (10/05)

| In re | Sandra K Hardeman |        | Case No |  |
|-------|-------------------|--------|---------|--|
|       |                   | Debtor |         |  |

| CREDITOR'S NAME,                                                               | C        | Hu          | sband, Wife, Joint, or Community                                                                    |        | င္က       | U            | D  |                 |
|--------------------------------------------------------------------------------|----------|-------------|-----------------------------------------------------------------------------------------------------|--------|-----------|--------------|----|-----------------|
| AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | CODEBTOR | C<br>A<br>M | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIN<br>IS SUBJECT TO SETOFF, SO STATE. |        |           | 021-00-04FWO |    | AMOUNT OF CLAIM |
| Account No. 1213746                                                            |          |             | Opened 8/03/05                                                                                      |        | Т         | T<br>E       |    |                 |
| Creditors Discount & Aud<br>415 E Main<br>Streator, IL 61364                   |          | -           | Collection Med102 Health Serv                                                                       | -      |           | D            |    | 104.00          |
| Account No. 401703656700001                                                    | T        |             | Opened 1/01/01 Last Active 8/21/02                                                                  |        | ┪         | П            |    |                 |
| First Midwest Bank/Na<br>300 N Hunt Club Rd<br>Gurnee, IL 60031                |          | -           |                                                                                                     |        |           |              |    | 0.00            |
| Account No. 5189131005608620                                                   | T        |             | Opened 6/01/01                                                                                      |        | $\exists$ | П            |    |                 |
| Fnbo/C<br>101 Woodbury Park West<br>Woodbury, NY 11803                         |          | -           |                                                                                                     |        |           |              |    | 0.00            |
| Account No. 154901478643                                                       |          |             | Opened 9/01/02 Last Active 2/16/06                                                                  |        | ┨         | П            |    |                 |
| G M A C<br>15303 S 94th Ave<br>Orland Park, IL 60462                           |          | -           |                                                                                                     |        |           |              |    | 774.00          |
| Account No. 154601317082                                                       | T        | T           | Opened 1/01/00 Last Active 10/01/02                                                                 |        | $\dashv$  | П            |    |                 |
| G M A C<br>15303 S 94th Ave<br>Orland Park, IL 60462                           |          | -           |                                                                                                     |        |           |              |    | 0.00            |
| Sheet no. 2 of 8 sheets attached to Schedule of                                |          |             |                                                                                                     |        |           | ota          |    | 878.00          |
| Creditors Holding Unsecured Nonpriority Claims                                 |          |             | (Tota                                                                                               | of the | S 1       | oag          | e) | 3.0.00          |

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Form B6F - Cont. (10/05)

| In re | Sandra K Hardeman |        | Case No |  |
|-------|-------------------|--------|---------|--|
|       |                   | Debtor |         |  |

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B T O R | Hu<br>H<br>C | IS SUBJECT TO SETOFF, SO STATE.      | CONTINGENT | UNLIQUIDA | DISPUTED | AMOUNT OF CLAIM |
|-------------------------------------------------------------------------------------------------|-----------------|--------------|--------------------------------------|------------|-----------|----------|-----------------|
| Account No. 376649                                                                              | l               |              | Opened 7/01/94<br>ChargeAccount      |            | Ę         |          |                 |
| Gemb/Jcp<br>Po Box 984100<br>El Paso, TX 79998                                                  |                 | -            | ChargeAccount                        |            |           |          | 0.00            |
| Account No. 603220338117                                                                        | Г               |              | Opened 5/01/01 Last Active 8/30/05   |            |           |          |                 |
| Gemb/Walmart<br>Po Box 981400<br>El Paso, TX 79998                                              |                 | -            | ChargeAccount                        |            |           |          |                 |
|                                                                                                 |                 |              |                                      |            |           |          | 1,206.00        |
| Account No. 5408-0100-2632-4687                                                                 | H               |              |                                      |            |           |          |                 |
| HSBC Card Services<br>PO BOX 17051<br>Baltimore, MD 21297                                       |                 | -            |                                      |            |           |          |                 |
|                                                                                                 |                 |              |                                      |            |           |          | 1,776.00        |
| Account No. <b>0026324687</b>                                                                   |                 |              | Opened 9/01/04 Last Active 8/12/05   |            |           |          |                 |
| Hsbc Nv<br>Po Box 19360<br>Salinas, CA 93901                                                    |                 | -            |                                      |            |           |          | 0.00            |
| Account No. 93790335937903359                                                                   | $\vdash$        | $\vdash$     | Opened 10/07/04 Last Active 11/08/05 | -          |           |          | 3.00            |
| Lane Bryant Retail Po Box 182121 Columbus, OH 43218                                             |                 | -            | ChargeAccount                        |            |           |          | 387.00          |
| Sheet no. <b>3</b> of <b>8</b> sheets attached to Schedule of                                   |                 |              | 2                                    | Sub        | tota      | ıl       | 3,369.00        |
| Creditors Holding Unsecured Nonpriority Claims                                                  |                 |              | (Total of t                          | his        | pag       | ge)      | 3,303.00        |

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Form B6F - Cont. (10/05)

| In re | Sandra K Hardeman | Cas    | se No |
|-------|-------------------|--------|-------|
|       |                   |        |       |
|       |                   | Debtor |       |

| CDEDITODIS NAME                                                                                              | С        | Нι          | sband, Wife, Joint, or Community                             | С             | U         | D             |                 |
|--------------------------------------------------------------------------------------------------------------|----------|-------------|--------------------------------------------------------------|---------------|-----------|---------------|-----------------|
| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)              | CODEBTOR | C<br>A<br>H | DATE CLAIM WAS INCUIDED AND                                  | ONTINGEN      | UNLIQUIDA | I S P U T E D | AMOUNT OF CLAIM |
| Account No. 6111311810320161                                                                                 |          |             | Opened 1/01/00 Last Active 2/01/00                           | Π̈́           | T         |               |                 |
| Mercury Finance Compan<br>5425 W 79th St<br>Burbank, IL 60459                                                |          | -           |                                                              |               | D         |               | 0.00            |
| Account No. 6111320810320161                                                                                 | ╁        |             | Opened 1/01/00 Last Active 2/01/00                           | +             | -         |               | 0.00            |
| Mercury Finance Compan<br>1050 E 162nd St<br>South Holland, IL 60473                                         |          | -           |                                                              |               |           |               | 0.00            |
| Account No. 4331010632  National City Mortgage Po Box 1820 Dayton, OH 45401                                  | -        | -           | Opened 6/01/02 Last Active 12/01/02<br>Mortgage              |               |           |               | 0.00            |
| Account No. 4331751037  National City Mortgage Po Box 1820 Dayton, OH 45401                                  |          | -           | Opened 12/01/02 Last Active 3/01/03<br>Mortgage              |               |           |               |                 |
| Account No. 8512283  Nco Fin/38 Po Box 13564 Philadelphia, PA 19101                                          | -        | -           | Opened 5/01/02 Last Active 4/01/03<br>Collection Medclr Inc. |               |           |               | 0.00            |
| Sheet no. <u>4</u> of <u>8</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |             | (Total o                                                     | Sub<br>f this |           |               | 0.00            |

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Form B6F - Cont. (10/05)

| In re | Sandra K Hardeman |        | Case No. |  |
|-------|-------------------|--------|----------|--|
| _     |                   | Debtor |          |  |

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B T O R | C<br>A<br>H | CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIGUIDATED | U   |        |
|-------------------------------------------------------------------------------------------------|-----------------|-------------|-------------------------------------------------------------------|------------|--------------|-----|--------|
| Account No. 1117412                                                                             | l               |             | Opened 2/01/01                                                    | Ι'         | Ė            |     |        |
| Nco Financial Systems-La<br>Pob 13690<br>Philadelphia, PA 19101                                 |                 | -           | Collection Med1inpatient Consul                                   |            | <i>D</i>     |     | 56.00  |
| Account No.                                                                                     | T               | T           |                                                                   |            |              |     |        |
| Nicor<br>PO BOX 2020<br>Aurora, IL 60507                                                        |                 | -           |                                                                   |            |              |     |        |
|                                                                                                 |                 |             |                                                                   |            |              |     | 115.00 |
| Account No. 61320252393  Nicor Gas 1844 Ferry Road Naperville, IL 60563                         |                 | _           | Opened 5/25/93 Last Active 7/03/02                                |            |              |     | 0.00   |
| Account No. 420904107036                                                                        |                 |             | Opened 4/01/95 Last Active 11/05/04                               |            |              |     |        |
| Numark Credit Union<br>Po Box 2729<br>Joliet, IL 60434                                          |                 | -           |                                                                   |            |              |     | 0.00   |
| Account No. 181900                                                                              | T               | T           | Opened 6/01/95 Last Active 6/01/98                                |            |              | Т   |        |
| Numark Credit Union<br>1654 Terry Dr<br>Joliet, IL 60436                                        |                 | _           |                                                                   |            |              |     | 0.00   |
| Sheet no5 _ of _8 _ sheets attached to Schedule of                                              |                 |             |                                                                   | Subt       | ota          | .1  | 474.00 |
| Creditors Holding Unsecured Nonpriority Claims                                                  |                 |             | (Total of t                                                       | his j      | pag          | ge) | 171.00 |

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| In re | Sandra K Hardeman |        | Case No. |  |
|-------|-------------------|--------|----------|--|
| _     |                   | Debtor |          |  |

| CREDITOR'S NAME,                                                               | CO       | 1           | sband, Wife, Joint, or Community                                                                    | CONT      | UNL    | D   | 1         |                 |
|--------------------------------------------------------------------------------|----------|-------------|-----------------------------------------------------------------------------------------------------|-----------|--------|-----|-----------|-----------------|
| AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | CODEBTOR | C<br>A<br>M | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. | ZH LZGEZH | Q<br>U | ĮĮ  |           | AMOUNT OF CLAIM |
| Account No. 1819000050001                                                      |          |             | Opened 10/03/01 Last Active 9/30/03                                                                 | Ť         | DATED  |     |           |                 |
| Numark Credit Union<br>1654 Terry Dr<br>Joliet, IL 60436                       |          | -           |                                                                                                     |           | D      |     |           | 0.00            |
| Account No. 2114100031                                                         |          |             | Opened 3/01/96 Last Active 2/01/00                                                                  |           | T      |     | T         |                 |
| Numark Credit Union<br>1654 Terry Dr<br>Joliet, IL 60436                       |          | -           | Automobile                                                                                          |           |        |     |           | 0.00            |
| Account No. 18190000500                                                        | t        |             | Opened 7/01/94 Last Active 1/01/03                                                                  | $\vdash$  | ┢      | H   | +         |                 |
| Numark Credit Union<br>1654 Terry Dr<br>Joliet, IL 60436                       |          | -           |                                                                                                     |           |        |     |           | 0.00            |
| Account No. 5084856                                                            | t        |             | Opened 2/01/05 Last Active 2/17/05                                                                  |           |        | T   | $\dagger$ |                 |
| Osi Collection Service<br>1375 E Woodfield Rd Ste<br>Schaumburg, IL 60173      |          | -           | Collection Silver Cross Hospita                                                                     |           |        |     |           | 975.00          |
| Account No. 5450241                                                            | 1        |             | Opened 8/01/05                                                                                      | $\top$    |        |     | T         |                 |
| Osi Collection Service<br>1375 E Woodfield Rd Ste<br>Schaumburg, IL 60173      |          | -           | Collection Silver Cross Hospita                                                                     |           |        |     |           | 320.00          |
| Sheet no. <b>_6</b> of <b>_8</b> sheets attached to Schedule of                |          |             |                                                                                                     | Subt      | tota   | ıl  | T         | 1,295.00        |
| Creditors Holding Unsecured Nonpriority Claims                                 |          |             | (Total of t                                                                                         | his j     | pag    | ge) | L         | 1,295.00        |

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Form B6F - Cont. (10/05)

| In re | Sandra K Hardeman |        | Case No. |  |
|-------|-------------------|--------|----------|--|
| _     |                   | Debtor |          |  |

| CREDITOR'S NAME,                                                               | C        | Нι               | sband, Wife, Joint, or Community                                                              | CO          | U             | D           |                 |
|--------------------------------------------------------------------------------|----------|------------------|-----------------------------------------------------------------------------------------------|-------------|---------------|-------------|-----------------|
| AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | CODEBTOR | C<br>A<br>M<br>H | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | NT I NG E N | NL QU L DATED | U<br>T<br>F | AMOUNT OF CLAIM |
| Account No. 938564-267                                                         |          |                  |                                                                                               | Т           | E             |             |                 |
| Roaman's<br>PO BOX 659728<br>San Antonio, TX 78265                             |          | -                |                                                                                               |             | D             |             | 195.00          |
| Account No.                                                                    | T        |                  |                                                                                               |             |               |             |                 |
| SBC Ameritech<br>Bill Payment Center<br>Chicago, IL 60663                      |          | -                |                                                                                               |             |               |             | 25.20           |
|                                                                                |          |                  |                                                                                               |             |               |             | 65.00           |
| Account No. 85216271030  State Farm Bank 4747 W Irving Park Chicago, IL 60641  |          | -                | Opened 8/05/02 Last Active 2/04/05                                                            |             |               |             | 0.00            |
| Account No. 5491484934038846                                                   |          |                  | Opened 10/01/04 Last Active 2/19/06                                                           |             |               |             |                 |
| Town North Bank<br>Po Box 814810<br>Dallas, TX 75381                           |          | -                |                                                                                               |             |               |             | 3,008.00        |
| Account No. <b>549113032088</b>                                                | H        | H                | Opened 5/31/01 Last Active 10/12/04                                                           |             |               | $\vdash$    |                 |
| Universal Card/Cbsdna<br>Po Box 6241<br>Sioux Falls, SD 57117                  |          | -                |                                                                                               |             |               |             | 0.00            |
| Sheet no7 of _8 sheets attached to Schedule of                                 | _        | _                |                                                                                               | Subt        |               |             | 3,268.00        |
| Creditors Holding Unsecured Nonpriority Claims                                 |          |                  | (Total of t                                                                                   | his ]       | pag           | e)          | 3,200.00        |

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Form B6F - Cont. (10/05)

| In re | Sandra K Hardeman | Case No. |  |
|-------|-------------------|----------|--|
| _     | ·                 | Debtor   |  |

|                                                                                     | _        | _                |                                                                                                     | _        | _                 | _               | _  |                 |
|-------------------------------------------------------------------------------------|----------|------------------|-----------------------------------------------------------------------------------------------------|----------|-------------------|-----------------|----|-----------------|
| CREDITOR'S NAME,                                                                    |          | Hu               | sband, Wife, Joint, or Community                                                                    | CO       | l U               | P               | 1  |                 |
| AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)      | CODEBTOR | C<br>1<br>M<br>H | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. | NTINGEN  | αυ <sub>-</sub> Γ | D I S P U T E D | -  | AMOUNT OF CLAIM |
| Account No. AH30003499                                                              |          |                  | Opened 3/28/05                                                                                      | ٦        | A<br>T<br>E<br>D  |                 | Γ  |                 |
| Uscb Corporation<br>101 Harrison Stree<br>Archbald, PA 18403                        |          | -                | Collection 01 Us Career Insti                                                                       |          | D                 |                 |    | 913.00          |
| Account No. <b>337146</b>                                                           |          |                  |                                                                                                     |          |                   | Γ               |    |                 |
| Village of Romeoville<br>18 Montrose Drive<br>Romeoville, IL 60446                  |          | -                |                                                                                                     |          |                   |                 |    |                 |
|                                                                                     | l        |                  |                                                                                                     |          |                   |                 | l  | 665.00          |
| Account No. 18260506937903359  Wfnnb/Lane Bryant 4590 E Broad St Columbus, OH 43213 |          | _                | Opened 10/01/04 Last Active 11/08/05 ChargeAccount                                                  |          |                   |                 |    |                 |
|                                                                                     | l        |                  |                                                                                                     |          |                   |                 |    | 440.00          |
|                                                                                     | ┸        |                  |                                                                                                     |          |                   |                 |    | 419.00          |
| Account No. <b>938564267</b>                                                        | 1        |                  | Opened 11/01/04 Last Active 11/08/05                                                                |          |                   |                 | l  |                 |
| Wfnnb/Roamans<br>Po Box 182121<br>Columbus, OH 43218                                |          | -                | ChargeAccount                                                                                       |          |                   |                 |    | 445.00          |
|                                                                                     | ┸        |                  |                                                                                                     |          |                   | L               | 1  | 415.00          |
| Account No. 148383813  Wfnnb/The Avenue Po Box 2974 Shawnee Mission, KS 66201       |          | -                | Opened 10/01/04 Last Active 11/08/05 ChargeAccount                                                  |          |                   |                 |    |                 |
|                                                                                     |          |                  |                                                                                                     |          |                   |                 |    | 438.00          |
| Sheet no. <b>8</b> of <b>8</b> sheets attached to Schedule of                       |          |                  | <u> </u>                                                                                            | L<br>Sub | tota              | 1               | +  |                 |
| Creditors Holding Unsecured Nonpriority Claims                                      |          |                  | (Total of                                                                                           |          |                   |                 | ,  | 2,850.00        |
|                                                                                     |          |                  | (Report on Summary of So                                                                            |          | Γota              |                 |    | 16,852.00       |
|                                                                                     |          |                  | (Report on Summary of So                                                                            | JHe(     | uult              | <b>-8</b> )     | 'L | ,               |

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Form B6G (10/05)

| In re | Sandra K Hardeman |        | Case No. |  |
|-------|-------------------|--------|----------|--|
|       |                   | Debtor | ,        |  |

#### SCHEDULE G. EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

G M A C 15303 S 94th Ave Orland Park, IL 60462 \$445 monthly lease payments for 2003 Chevy Impala. Approximately 9 additional payments remain.

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Form B6H (10/05)

| In re | Sandra K Hardeman | Case No. |  |
|-------|-------------------|----------|--|
| _     |                   | Debtor   |  |

#### SCHEDULE H. CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Conrad Hardeman 2213 Tamarack Drive Joliet, IL 60432 MERS/First Horizon c/o Fisher & Shapiro 4201 Lake Cook Road, First Floor Northbrook, IL 60062

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Form B6I (10/05)

| In re | Sandra K Hardeman |           | Case No. |  |
|-------|-------------------|-----------|----------|--|
|       |                   | Debtor(s) |          |  |

#### SCHEDULE I. CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Snouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 7, 11, 12, or 13 case whether

| Debtor's Marital Status:               | unless the spouses are separated and a joint petition is not a DEPENDENTS                                  | OF DEBTOR AND                               |                    | 101 0111        |               |
|----------------------------------------|------------------------------------------------------------------------------------------------------------|---------------------------------------------|--------------------|-----------------|---------------|
| Married                                | RELATIONSHIP: son                                                                                          | AGE:                                        | 7                  |                 |               |
| <b>Employment:</b>                     | DEBTOR                                                                                                     |                                             | SPOUSE             |                 |               |
| Occupation Occupation                  | medical biller                                                                                             | hydralic clea                               |                    |                 |               |
| Name of Employer                       | Fresenuis Medical Care                                                                                     | Pinnacle Pig                                |                    |                 |               |
| How long employed                      | 1 year +                                                                                                   | approx 1 mg                                 |                    |                 |               |
| Address of Employer                    | fka Bio-Medical Applications of Illinois<br>One Westbrook Corporate Center, #1000<br>Westchester, IL 60154 | 8118-49th Av<br>Alberta Cana<br>Red Deer, C | venue Close<br>ada |                 |               |
| INCOME: (Estimate of a                 | verage monthly income)                                                                                     |                                             | DEBTOR             |                 | SPOUSE        |
| 1. Current monthly gross               | wages, salary, and commissions (Prorate if not paid mor                                                    | nthly.) \$                                  | 2,848.00           | \$              | 2,800.00      |
| 2. Estimate monthly overt              | ime                                                                                                        | \$                                          | 0.00               | \$              | 0.00          |
| 3. SUBTOTAL                            |                                                                                                            | \$_                                         | 2,848.00           | \$_             | 2,800.00      |
| 4. LESS PAYROLL DED                    | UCTIONS                                                                                                    |                                             |                    |                 |               |
| a. Payroll taxes and s                 |                                                                                                            | \$                                          | 434.00             | \$              | 790.00        |
| b. Insurance                           |                                                                                                            | \$                                          | 376.00             | \$ <u></u>      | 0.00          |
| c. Union dues                          |                                                                                                            | \$                                          | 0.00               | \$ <del>-</del> | 0.00          |
| d. Other (Specify):                    |                                                                                                            | \$                                          | 0.00               | \$              | 0.00          |
| di cinei (specify).                    |                                                                                                            | \$                                          | 0.00               | \$              | 0.00          |
| 5. SUBTOTAL OF PAYE                    | ROLL DEDUCTIONS                                                                                            | \$_                                         | 810.00             | \$_             | 790.00        |
| 6. TOTAL NET MONTH                     | LY TAKE HOME PAY                                                                                           | \$_                                         | 2,038.00           | \$              | 2,010.00      |
| 7. Regular income from o               | peration of business or profession or farm. (Attach detail                                                 | led statement) \$                           | 0.00               | \$              | 0.00          |
| 8. Income from real prope              | erty                                                                                                       | \$                                          | 0.00               | \$              | 0.00          |
| 9. Interest and dividends              |                                                                                                            | \$                                          | 0.00               | \$              | 0.00          |
| that of dependents lis                 |                                                                                                            | btor's use or \$                            | 0.00               | \$_             | 0.00          |
| 11. Social security or othe (Specify): | er government assistance                                                                                   | \$                                          | 0.00               | \$              | 0.00          |
| (Specify).                             |                                                                                                            |                                             | 0.00               | \$              | 0.00          |
| 12. Pension or retirement              | income                                                                                                     | \$                                          | 0.00               | \$              | 0.00          |
| 13. Other monthly income               |                                                                                                            |                                             |                    |                 |               |
| (Specify):                             |                                                                                                            | \$                                          | 0.00               | \$ _            | 0.00          |
|                                        |                                                                                                            | \$                                          | 0.00               | \$_             | 0.00          |
| 14. SUBTOTAL OF LINI                   | ES 7 THROUGH 13                                                                                            | \$_                                         | 0.00               | \$              | 0.00          |
| 15. TOTAL MONTHLY                      | INCOME (Add amounts shown on lines 6 and 14)                                                               | \$_                                         | 2,038.00           | \$              | 2,010.00      |
| 16. TOTAL COMBINED                     | MONTHLY INCOME: \$ 4,04                                                                                    | 18.00 (Re                                   | eport also on Sun  | nmary           | of Schedules) |

<sup>17.</sup> Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: Debtor's spouse is subject to change. Debtor's spouse started new job and income could increase.

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Form B6J (10/05)

| In re | Sandra K Hardeman |           | Case No. |  |
|-------|-------------------|-----------|----------|--|
|       |                   | Debtor(s) |          |  |

### SCHEDULE J. CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average monthly expenses of the debtor and the debtor's family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

| ☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Comp expenditures labeled "Spouse."        | lete a separato | e schedule of |
|----------------------------------------------------------------------------------------------------------------------------------------------|-----------------|---------------|
| Rent or home mortgage payment (include lot rented for mobile home)                                                                           | \$              | 0.00          |
| a. Are real estate taxes included? Yes X No                                                                                                  | Ψ               |               |
| b. Is property insurance included? Yes X No                                                                                                  |                 |               |
| 2. Utilities: a. Electricity and heating fuel                                                                                                | \$              | 300.00        |
| b. Water and sewer                                                                                                                           | \$              | 30.00         |
| c. Telephone                                                                                                                                 | \$              | 100.00        |
| d. Other                                                                                                                                     | \$              | 0.00          |
| 3. Home maintenance (repairs and upkeep)                                                                                                     | \$              | 63.00         |
| 4. Food                                                                                                                                      | \$              | 575.00        |
| 5. Clothing                                                                                                                                  | \$              | 110.00        |
| 6. Laundry and dry cleaning                                                                                                                  | \$              | 20.00         |
| 7. Medical and dental expenses                                                                                                               | \$              | 20.00         |
| 8. Transportation (not including car payments)                                                                                               | \$              | 200.00        |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc.                                                                          | \$              | 30.00         |
| 10. Charitable contributions                                                                                                                 | \$              | 0.00          |
| 11. Insurance (not deducted from wages or included in home mortgage payments)                                                                |                 |               |
| a. Homeowner's or renter's                                                                                                                   | \$              | 0.00          |
| b. Life                                                                                                                                      | \$              | 0.00          |
| c. Health                                                                                                                                    | \$              | 0.00          |
| d. Auto                                                                                                                                      | \$              | 100.00        |
| e. Other  12. Taxes (not deducted from wages or included in home mortgage payments)                                                          | \$              | 0.00          |
|                                                                                                                                              |                 |               |
| (Specify)                                                                                                                                    | \$              | 0.00          |
| 13. Installment payments: (In chapter 11, 12 and 13 cases, do not list payments to be included in the plan.)                                 |                 |               |
| a. Auto                                                                                                                                      | \$              | 445.00        |
| b. Other                                                                                                                                     | \$              | 0.00          |
| c. Other                                                                                                                                     | \$              | 0.00          |
| d. Other                                                                                                                                     | \$              | 0.00          |
| 14. Alimony, maintenance, and support paid to others                                                                                         | \$              | 0.00          |
| 15. Payments for support of additional dependents not living at your home                                                                    | \$              | 0.00          |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement)                                             | \$              | 0.00          |
| 17. Other haircuts/personal hygiene                                                                                                          | \$              | 80.00         |
| Other                                                                                                                                        | \$              | 0.00          |
| 18. TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)                                                                             | \$              | 2,073.00      |
| 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document: | _               |               |
| 20. STATEMENT OF MONTHLY NET INCOME                                                                                                          |                 |               |
| a. Total monthly income from Line 16 of Schedule I                                                                                           | \$              | 4,048.00      |
| b. Total monthly expenses from Line 18 above                                                                                                 | \$              | 2,073.00      |
| c. Monthly net income (a. minus b.)                                                                                                          | \$              | 1,975.00      |

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Official Form 6-Decl. (10/05)

### **United States Bankruptcy Court** Northern District of Illinois

| In re | Sandra K Hardeman                                                                                             |             |                                                | Case No.        |       |
|-------|---------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------|-----------------|-------|
|       |                                                                                                               |             | Debtor(s)                                      | Chapter         | 13    |
|       | DECLARATION                                                                                                   | CONCERN     | ING DEBTO                                      | R'S SCHEDUL     | ES    |
|       | DECLARATION UNDER                                                                                             | R PENALTY ( | OF PERJURY BY                                  | ' INDIVIDUAL DI | EBTOR |
|       | I declare under penalty of perjury sheets [total shown on summary parts   knowledge, information, and belief. |             |                                                |                 |       |
| Date  | March 22, 2006                                                                                                | Signature   | /s/ Sandra K Harde<br>Sandra K Harde<br>Debtor |                 |       |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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Official Form 7 (10/05)

#### United States Bankruptcy Court Northern District of Illinois

| In re | Sandra K Hardeman |           | Case No. |    |
|-------|-------------------|-----------|----------|----|
|       |                   | Debtor(s) | Chapter  | 13 |

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. Do not include the name or address of a minor child in this statement. Indicate payments, transfers and the like to minor children by stating "a minor child." See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

#### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE \$9,500.00 2006 estimate \$44,574.00 2005 estimate \$73,718.00 2004 estimate

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

#### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts.* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL PAYMENTS AMOUNT PAID OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,000. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT
DATES OF PAID OR
PAYMENTS/ VALUE OF AMOUNT STILL
NAME AND ADDRESS OF CREDITOR TRANSFERS TRANSFERS OWING

None

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND

AMOUNT STILL

RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT
AND CASE NUMBER
NATURE OF PROCEEDING
MERS v. Hardeman, 05 CH
foreclosure
COURT OR AGENCY
AND LOCATION
Circuit Court of 12th Judicial
Stayed
Circuit

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE
BENEFIT PROPERTY WAS SEIZED DATE

DESCRIPTION AND VALUE OF PROPERTY

DATE OF SEIZURE

ATE OF SEIZURE

### ${\bf 5.}\ \ Repossessions, for eclosures\ and\ returns$

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE

ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND LOCATION

NAME AND ADDRESS OF CUSTODIAN

OF COURT CASE TITLE & NUMBER DATE OF ORDER

DESCRIPTION AND VALUE OF

3

**PROPERTY** 

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DESCRIPTION AND DATE OF GIFT

VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

#### 9. Payments related to debt counseling or bankruptcy

None 

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE **Robert Schaller Law Office** 907 N. Elm, Suite 100 Hinsdale, IL 60521

DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR prepetition

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY 960 plus \$40 credit report fee

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

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None

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

#### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

LOCATION OF PROPERTY

#### 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

DESCRIPTION AND VALUE OF

NAME AND ADDRESS OF OWNER **PROPERTY** 

#### 15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

**ADDRESS** NAME USED DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the

docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

5

#### 18. Nature, location and name of business

None

NAME

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOC. SEC. NO./ COMPLETE EIN OR OTHER TAXPAYER

OTHER TAXPAYER
I.D. NO. ADDRESS NATURE OF BUSINESS ENDING DATES

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME ADDRESS

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Best Case Bankruptcy

6

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS DATES SERVICES RENDERED

None b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME **ADDRESS** DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME **ADDRESS** 

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within two years immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

20. Inventories

None a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory,

and the dollar amount and basis of each inventory.

DOLLAR AMOUNT OF INVENTORY DATE OF INVENTORY INVENTORY SUPERVISOR (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

DATE OF INVENTORY

None

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY **RECORDS** 

#### 21 . Current Partners, Officers, Directors and Shareholders

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS NATURE OF INTEREST PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NATURE AND PERCENTAGE NAME AND ADDRESS TITLE OF STOCK OWNERSHIP

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#### 22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

**ADDRESS** DATE OF WITHDRAWAL NAME

None

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE OF TERMINATION

#### 23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

7

#### 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

#### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date | March 22, 2006 | Signature | /s/ Sandra K Hardeman |  |
|------|----------------|-----------|-----------------------|--|
|      |                |           | Sandra K Hardeman     |  |
|      |                |           | Debtor                |  |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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United States Bankruptcy Court
Northern District of Illinois

| In re | Sandra K Hardeman |           | Case No. |    |
|-------|-------------------|-----------|----------|----|
|       |                   | Debtor(s) | Chapter  | 13 |

|      | DISCLOSURE OF COMPENSA                                                                                                                                                                                                                                                | ATION OF ATTORN                              | EY FOR       | DEBTOR(S)                       |                           |
|------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|--------------|---------------------------------|---------------------------|
| 1.   | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2 compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of or                                                                                       | of the petition in bankruptcy, or            | agreed to b  | e paid to me, for services rene | r and that<br>dered or to |
|      | For legal services, I have agreed to accept                                                                                                                                                                                                                           |                                              | \$           | 2,500.00                        |                           |
|      | Prior to the filing of this statement I have received                                                                                                                                                                                                                 |                                              | \$           | 960.00                          |                           |
|      | Balance Due                                                                                                                                                                                                                                                           |                                              | \$           | 1,540.00                        |                           |
| 2.   | \$ of the filing fee has been paid.                                                                                                                                                                                                                                   |                                              |              |                                 |                           |
| 3.   | The source of the compensation paid to me was:                                                                                                                                                                                                                        |                                              |              |                                 |                           |
|      | ☐ Debtor ☐ Other (specify): plus \$40 or                                                                                                                                                                                                                              | credit report fee                            |              |                                 |                           |
| 4.   | The source of compensation to be paid to me is:                                                                                                                                                                                                                       |                                              |              |                                 |                           |
|      | ■ Debtor □ Other (specify):                                                                                                                                                                                                                                           |                                              |              |                                 |                           |
| 5.   | ■ I have not agreed to share the above-disclosed compensation                                                                                                                                                                                                         | ation with any other person unle             | ess they are | nembers and associates of my    | law firm.                 |
|      | ☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names of                                                                                                                                                 |                                              |              |                                 | w firm. A                 |
| 6.   | In return for the above-disclosed fee, I have agreed to render a. Preparation and filing of any petition, schedules, stateme b. Representation of the debtor at the meeting of creditors a c. [Other provisions as needed]  all items identified in engagement letter | ent of affairs and plan which ma             | y be require | d;                              |                           |
| 7.   | By agreement with the debtor(s), the above-disclosed fee doc<br>excludes all items not specifically include<br>engagement excludes any services relating                                                                                                              | ded in engagement letter                     | . Specifi    |                                 |                           |
|      | C                                                                                                                                                                                                                                                                     | CERTIFICATION                                |              |                                 |                           |
| this | I certify that the foregoing is a complete statement of any a bankruptcy proceeding.                                                                                                                                                                                  | agreement or arrangement for p               | ayment to n  | ne for representation of the de | ebtor(s) in               |
| Dat  | red: March 22, 2006                                                                                                                                                                                                                                                   | /s/ Robert V. Schalle                        | r            |                                 |                           |
|      |                                                                                                                                                                                                                                                                       | Robert V. Schaller S                         | CR3-6190     | 406                             | _                         |
|      |                                                                                                                                                                                                                                                                       | Robert Schaller Law<br>907 N. Elm, Suite 100 |              |                                 |                           |
|      |                                                                                                                                                                                                                                                                       | Hinsdale, IL 60521                           | ,            |                                 |                           |
|      |                                                                                                                                                                                                                                                                       | 630-655-1233                                 |              |                                 |                           |

02/03/04 rev.

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN **CHAPTER 13 DEBTORS AND THEIR ATTORNEYS** (Model Retention Agreement)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure—but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to expect certain services to be performed by their attorneys, but again, debtors have responsibilities to their attorneys also. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved the following agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys. By signing this agreement, debtors and their attorneys accept these responsibilities.

#### BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)

- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor will also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.

### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.

- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary amended statements and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case before the bankruptcy court.

#### ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES [Check one option.]

- Option A: flat fee through confirmation
- 1a. Pre-confirmation services. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case, unless otherwise ordered by the court. For all of the services outlined above, required to be provided before confirmation of a plan, the attorney will be paid a fee of \$ 2,500.00 . In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for preconfirmation services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.
- 1b. *Post-confirmation services*. Compensation for services required after confirmation will be in such amounts as are allowed by the court, on application accompanied by an itemization of the services rendered, showing the date, time, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified that the debtor may appear in court to object.

- □ Option B: flat fee through case closing
- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a fee of \$ N/A . In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

- 2. Early termination of the case. Fees payable under the provisions set out above are not refundable in the event that the case is dismissed before confirmation (Option A) or completion of plan payments (Option B), unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If a dismissal is due to such a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 3. *Retainers*. The attorney may receive a retainer or other payment before filing the case, but may not receive fees directly from the debtor after the filing of the case. In any application for fees, whether or not requiring an itemization, the attorney shall disclose to the court any fees paid by the debtor prior to the case filing.

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- 4. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 5. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise not engaging in proper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 6. Discharge of the attorney. The debtor may discharge the attorney at any time.

| Date:March 22, 2006                                                                              |                                 |  |
|--------------------------------------------------------------------------------------------------|---------------------------------|--|
| Total fee to be paid for attorney's services: \$ _ 2,500.00 (Do not sign if this line is blank.) |                                 |  |
| Signed:                                                                                          |                                 |  |
| /s/ Sandra K Hardeman                                                                            | /s/ Robert V. Schaller          |  |
| Sandra K Hardeman                                                                                | Robert V. Schaller SCR3-6190406 |  |
|                                                                                                  | Attorney for Debtor(s)          |  |
|                                                                                                  |                                 |  |
| Debtor(s)                                                                                        |                                 |  |

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$220 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$274)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

### <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$150 filing fee, \$39 administrative fee: Total fee \$189)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

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#### **B 201** (10/05)

#### **Chapter 11:** Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

#### **Certificate of Attorney**

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

| Robert V. Schaller SCR3-6190406                                                                     | X /s/ Robert V. Schaller           | March 22, 2006 |  |  |  |
|-----------------------------------------------------------------------------------------------------|------------------------------------|----------------|--|--|--|
| Printed Name of Attorney                                                                            | Signature of Attorney              | Date           |  |  |  |
| Address:                                                                                            |                                    |                |  |  |  |
| 907 N. Elm, Suite 100                                                                               |                                    |                |  |  |  |
| Hinsdale, IL 60521                                                                                  |                                    |                |  |  |  |
| 630-655-1233                                                                                        |                                    |                |  |  |  |
| Certificate of Debtor I (We), the debtor(s), affirm that I (we) have received and read this notice. |                                    |                |  |  |  |
| Sandra K Hardeman                                                                                   | $\mathrm{X}$ /s/ Sandra K Hardeman | March 22, 2006 |  |  |  |
| Printed Name(s) of Debtor(s)                                                                        | Signature of Debtor                | Date           |  |  |  |
| Case No. (if known)                                                                                 | X                                  |                |  |  |  |
| Case No. (II Milowii)                                                                               | _ Λ                                |                |  |  |  |

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# **United States Bankruptcy Court Northern District of Illinois**

| In re | Sandra K Hardeman                          |                                                             | Case No.                       |              |
|-------|--------------------------------------------|-------------------------------------------------------------|--------------------------------|--------------|
|       |                                            | Debtor(s)                                                   | Chapter 13                     |              |
|       | VE                                         | RIFICATION OF CREDITOR M                                    | ATRIX                          |              |
|       |                                            | Number of                                                   | Creditors:                     | 43           |
|       | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of credite                    | ors is true and correct to the | e best of my |
| Date: | March 22, 2006                             | /s/ Sandra K Hardeman Sandra K Hardeman Signature of Debtor |                                |              |

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Robert V. Schaller Creditors Discount & A Illinois Department of Public Aid Division of Child Support Enforcem. Robert Schaller Law Office 415 E Main St 907 N. Elm, Suite 100 Streator, IL 61364 509 S. 6th Street, 6th Floor Hinsdale, IL 60521 Springfield, IL 62701 Creditors Discount & Aud Lane Bryant Retail Sandra K Hardeman 2213 Tamarack Drive 415 E Main Po Box 182121 Columbus, OH 43218 Joliet, IL 60432 Streator, IL 61364 Mercury Finance Compan Avenue First Midwest Bank/Na 5425 W 79th St PO BOX 659584 300 N Hunt Club Rd San Antonio, TX 78265 Gurnee, IL 60031 Burbank, IL 60459 Cap One Bk Fnbo/C Mercury Finance Compan Po Box 85520 101 Woodbury Park West 1050 E 162nd St Richmond, VA 23285 Woodbury, NY 11803 South Holland, IL 60473 G M A C MERS/First Horizon Chapter 13 Trustee Stearns c/o Fisher & Shapiro Glenn Stearns 15303 S 94th Ave 4343 Commerce Court Orland Park, IL 60462 4201 Lake Cook Road, First Floor Lisle, IL 60532 Northbrook, IL 60062 National City Mortgage Chase Gemb/Jcp Po Box 984100 Po Box 1820 800 Brooksedge Blvd Westerville, OH 43081 El Paso, TX 79998 Dayton, OH 45401 Gemb/Walmart Nco Fin/38 ComED Bill Payment Center Po Box 981400 Po Box 13564 Chicago, IL 60668 El Paso, TX 79998 Philadelphia, PA 19101 Conrad Hardeman **HSBC Card Services** Nco Financial Systems-La PO BOX 17051 Pob 13690 2213 Tamarack Drive Joliet, IL 60432 Baltimore, MD 21297 Philadelphia, PA 19101

Hsbc Nv

Po Box 19360

Salinas, CA 93901

Nicor

PO BOX 2020

Aurora, IL 60507

Costep

2540 W Trenton Rd

Edinburg, TX 78539

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Nicor Gas 1844 Ferry Road Naperville, IL 60563 Universal Card/Cbsdna Po Box 6241 Sioux Falls, SD 57117

Numark Credit Union Po Box 2729 Joliet, IL 60434 Uscb Corporation 101 Harrison Stree Archbald, PA 18403

Numark Credit Union 1654 Terry Dr Joliet, IL 60436 Village of Romeoville 18 Montrose Drive Romeoville, IL 60446

Osi Collection Service 1375 E Woodfield Rd Ste Schaumburg, IL 60173 Wfnnb/Lane Bryant 4590 E Broad St Columbus, OH 43213

Roaman's PO BOX 659728 San Antonio, TX 78265

Wfnnb/Roamans Po Box 182121 Columbus, OH 43218

SBC Ameritech Bill Payment Center Chicago, IL 60663 Wfnnb/The Avenue Po Box 2974 Shawnee Mission, KS 66201

State Farm Bank 4747 W Irving Park Chicago, IL 60641 Will County Treasurer--Property Tax Will County Office Building 302 N. Chicago St. Joliet, IL 60432

State Farm Fncl Svcs F 3 State Farm Plaza Bloomington, IL 61710

Town North Bank Po Box 814810 Dallas, TX 75381